SOUTH CENTRAL LIBRARY SYSTEM

LIBRARY CARD APPLICATION IDENTIFICATION REQUIRED:

4 Digit Pin # _____

- **Photo I.D.** (i.e. Driver's license, state I.D. card)
- **Proof of Current Address** (i.e. Driver's license, state I.D., recent mail, check book)

PATRON INFORMATION (please print):

Last First Age Greater Male Age Greater Month Day Year Female Male Age Greater	City or Vi	-	State	Zip
Street, RR/Fire Number or P.O. Box ounty of Residence: Township esidential Address: (Complete if different from mailing address	p:	-		Zip
ounty of Residence: Township esidential Address: (Complete if different from mailing address	p:	-		Δip
esidential Address: (Complete if different from mailing addres	-			
	ss)			
reet, RR/Fire Number or P.O. Box				
	City or Vill	age	State	Zip
ome Phone: () Email Addı	ress:			
usiness Phone: () Extens	sion:			
would prefer to be notified of my holds by: Email	Phone	Text Messag	je	
brary (or bookmobile stop) where I would prefer to pick	k up my holds:			
		(Home Agency)	
and or my children or minor dependents what resources are ATRON SIGNATURE :				
OR JUVENILES (AGE 0-13), PLEASE COMPLETE: arent or Legal Guardian Signature: lease print Parent or Legal Guardian Name: OR LIBRARY STAFF USE ONLY:				
end to: Home Agency:	Initial		necked:	
rom:	Photo ID:			<u></u>
		Pro	of of Current	Address:
ending library check one:				
	from		Addres Nam	istration s Change e Change Lost Card Renewal